Case 3:18-cv-00958-SMY Document 1-1 Filed 04/16/18 Page 1 of 6 Page ID #10

ILLINOIS DEPARTMENT OF CORRECTIONS COPICAL 12/04/17@POCLE

Exhibit 1	OFFENDER'S GRIEVANCE	
Date: Jan. 13-2017	Offender: (Please Print) David H. Caharrott	1D#:M-38621
Present Facility: Menarch	Facility where grievance issue occurred:	lenard
NATURE OF GRIEVANCE:		10 TO 45 TO 45 TO 10
Personal Property Staff Conduct Transfer Denial by Facility	☐ Mail Handling ☐ Dietary ☐ Transfer Denial by Transfer Cogregitator	☐ ADA Disability Accommodation ☐ HIPAA Violation of ☐ Other (specify): Right's
	Date of Report  REVIEW BOARD  relials may be grieved immediately via the local administration of	
Complete: Attach a copy of any perti- Counselor, unless the issue inv Grievance Officer, only if the is Chief Administrative Officer, of Administrative Review Board, administration of psychotropic of Administrative Officer.	nent document (such as a Disciplinary Report, Shakedown Record tolves discipline, is deemed an emergency, or is subject to direct sue involves discipline at the present facility or issue not resolve only if EMERGENCY grievance.  only if the Issue involves transfer denial by the Transfer Coordings, issues from another facility except personal property issue	rd, etc.) and send to: ct review by the Administrative Review Board. ed by Counselor. inator, protective custody, involuntary es, or issues not resolved by the Chief
for each person involved): T	nation including a description of what happened, when and where it	This their the contract
Whole I.D.O.C &	piled to protect me when I to	a multiple State from
C.O's, pshe Doctor	's, major's and so on all the	way to springfield
when I got denic	te P.C. What I told was the	e bloods and the whole
Fin ball group a	las threating me. I was scan	and for my life but was
	, out into Coural Population	
	time For the Fin ball's to act	
	cell' with one on logarless is	
What I seared a	nost happened in the month of	F Nov. 2016. I was
Knocked unconc	louse from being Kicked in	the back of the Y
Relief Requested: Tm (Cape	aling reinbursment for my p	bin and suffering not
P.C. SCOCK For m	I but also mental suffering	s paid"
☐ Check only if this is an EMERGE	NCY grievance due to a substantial risk of imminent personal in	njury of other serious of irreparable harm to self.
David H. 2	ender's Signature (Continue on reverse side if necessary)	862 111312012 ID# Date
	(CONTINUE OIL LEVELSE SIGE IT RECESSERY)	
= :	Counselor's Response (if applicable)	]
Date Received://	A S	outside jurisdiction of this facility. Send to dmInistrative Review Board, P.O. Box 19277, pringfield, IL 62794-9277
Response:		
	1	
		1 1
Print Counsel	or's Name Counselor's	s Signature Date of Response
	EMERGENCY REVIEW	
Date		<b></b>
Received://	Is this determined to be of an emergency nature?	Yes, expedite emergency grievance  No; an emergency is not substantiated.  Offender should submit this grievance in the normal manner.
		1 1
	Chief Administrative Officer's Signature	Date

## Case 3:18-cv-00958-SMY Document 1-1 Filed 04/16/18 Page 2 of 6 Page ID #11

## ILLINOIS DEPARTMENT OF CORRECTIONS OFFENDER'S GRIEVANCE (Continued)

head and my face hitting the bar's. Which could up me have a
broken eye socket I went to 2 hospitals, got stitch's and spent like
2 week's in health care at menand, all because I.D.O.C. failed
L 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
to protect me. Offer being told about threats to my life
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Exhibit#2	OFFENDER'S GRIEVANCE	cupred 12/04/17@ 000 CC
Aff :	ender: ase Print) David H. Caharce H	10#: M-38/02(
Present Facility:	Facility where grievance	nerard
NATURE OF GRIEVANCE:	reseas coorrigan)	ICATA
Personal Property  Staff Conduct  Transfer Denial by Facility	Mail Handling Restoration of Good Tim Dietary Medical Treatment Transfer Denial by Transfer Scortington	De ADA Disability Accommodation  HIPAA Violation of  Other (specify): Right's
Disciplinary Report:/	, NOV <b>0 9</b> 2017	
l a company	ADMINISTRATIV	on the protective custody status notification.
Complete: Attach a copy of any pertinent of Counselor, unless the issue involves Grievance Officer, only if the issue in Chief Administrative Officer, only if Administrative Review Board, only	document (such as a Disciplinary Report, Shakedown Re discipline, is deemed an emergency, or is subject to d nvolves discipline at the present facility or lasue not res	cord, etc.) and send to: irect review by the Administrative Review Board. olved by Counselor. ordinator, protective custody, involuntary
Summary of Grievance (Provide information for each person involved):	including a description of what happened, when and when	e it happened, and the name or identifying information
	4 to suce what's going on	
	anything from mercial on 1	Dr.
on the 13th of Jan.	This is exact and for we	al.
I am writing th	his grievance because th	s facility and the whole
	otest me when I told mult	
Asha Doctors, majors	and so an all the ary	to springfield when I
got denide Ac. Who	it I told was the blood's	and the whole fin ball.
( Table 1 )   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100	me. I am scored for m	
to go back out into	Genral Application by I	D.o. C. Granted it Y
		ain and suffering. Not only
	a mental SLEGETING Pero	
5,000 \$ For myself o	and all medical bill's paid	
☐ Check only If this is an EMERGENCY gri	levance due to a substantial risk of imminent personal	injury or other serious or irreparable harm to self.
David H. David		10# 3 120 12012
	(Continue on reverse side if necessary)	
	Counselor's Response (If applicable)	
Date Received:/	A	Outside jurisdiction of this facility. Send to disdinstrative Review Board, P.O. Bex 19277, pringfield, IL 62794-9277
Response:		
	800 da (5 d)	
Print Counselor's Name	· Counselor's	Signature Date of Response
	EMERGENCY REVIEW	
Date Received: / /	is this determined to be of an emergency nature?	Yes; expedite emergency grievance
		No; an emergency is not substantiated.  Offender should submit this grievance in the normal manner.
Object below to	istrative Officer's Signature	Date Control

## ILLINOIS DEPARTMENT OF CORRECTIONS OFFENDER'S GRIEVANCE (Continued)

when I got plan	the fin ball's to act and tin a rell with one on a what I trade	a they did to
purce in mener	d. What I feared most !	10 gallery in West
of Nov 2016.	I was Knocked unconcious	raffed in the month
in the back of	the head and the	from being Kicker
ended up me ho	Ven co how	ting the box's which
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about threat's	to my life	he after being told
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Exhibit 3	OFFEND	ER'S GRIEVANCE		
1/ou 5-2017 1	Offender: Please Print) David	H. Gharr	لحك.	10#: M-38(a21
Present Facility:		Facility where grievance	nenard	
NATURE OF GRIEVANCE:		ideas occition.	ie wid	
☐ Personal Property ☐ Staff Conduct ☐ Transfer Denial by Facility ☐ Disciplinary Report:	Mail Handling Dietary Transfer Denial by	NOV 0 9 2017	☐ HIPAA ☐ Other (s	(Marie )
		ADMINIS I KATI\ BEMBMBAAR		
Complete: Attach a copy of any pertine Counselor, unless the issue involved in the issue of the issue involved in the issue of the issue involved in the issue of	nt document (such as a Disc ves discipline, is deemed an le involves discipline at the p y if EMERGENCY grievance nly if the issue involves trans gs, issues from another facili	ciplinary Report, Shakedown F emergency, or is subject to cresent facility or issue not re s. ster denial by the Transfer C ity except personal property	direct review by the A solved by Counselor coordinator, protective issues, or issues not	to: Administrative Review Soard.  custody, involuntary resolved by the Chief
Summary of Grievance (Provide informati for each person involved):	on including a description of	what happened, when and wh	ere it happened, and the	e name or identifying information
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about it at all. I			~	
Offer tending it in	or if somely	ning else happ	encl. Then	because I
have heard nothing	I wrote sp	cing Field "You	u" March	20th When +
wrote you it was				
to pontiac so I				The second secon
springfield utula		1		<u> </u>
later given you gay				
For physical but al			ent Placement	t in P.C., 5,000\$
for mysels, and all		A CONTRACTOR OF STREET	At-land A	
Check only if this is an EMERGENCY				us or irreparable harm to set.
David H. She	s Signature		10#	11 5 12017 Date
	(Continue on r	everse side if necessary)		or ear land agency.
8	Counselor's F	Response (If applicable)		
Date Received://	Send directly to Grid			f this facility. Send to w Board, P.O. Box 19277, -9277
Response:				
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Print Counselor's Nan	••,	Councelor	's Signature	Date of Branches
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Received:/	Is this determined to be	of an emergency nature?	No; an emerger	mergency gdevance ncy is not substantiated.
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Chief Administrative Officer's Signature

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ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

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